

# Pregnancy Behavioral Risk Assessment

Date: \_\_\_\_\_

**PASTE "C Label" HERE**

Patient Name: \_\_\_\_\_

First                      M.I.                      Last

SSN: \_\_\_\_\_

Health Dept. \_\_\_\_\_

Circle one: **Z33.1** - (Pregnancy)                      or                      **Z39.2** - (Postpartum)

OB/GYN: \_\_\_\_\_

Agency/Location: \_\_\_\_\_

Expected Delivery Date: \_\_\_\_\_

Hospital most likely for delivery: \_\_\_\_\_

Location of hospital: \_\_\_\_\_

Patient Phone: (\_\_\_\_) \_\_\_\_\_ OR (\_\_\_\_) \_\_\_\_\_

Patient Mailing Address: \_\_\_\_\_

<p style="text-align: center;">* _____ *</p> <p><b>Signature</b> of health care provider or their duly authorized representative confirming pregnancy diagnosis</p>	<p style="text-align: center;">* _____ *</p> <p><b>Signature</b> of individual completing screening form, if different</p>
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**Health care provider**    ➡ After asking ALL screening questions, return to question #1 and review with patient, checking suggested actions taken below.  
                                  ➡ Offer every patient a fact sheet on the importance of abstinence from alcohol, tobacco, and other drugs during pregnancy.

**Patient**    ➡ Women's health can be affected by emotional problems, alcohol, tobacco, other drug use, and domestic violence. Women's health is also affected when those same by problems are present in people close to us. By "alcohol," we mean beer, wine, wine coolers, or liquor.  
*(Institute for Health and Recovery)*

Screening Questions	Answers	Suggested Action
<p>1. Did any of your <b>parents</b> ever have a problem with alcohol or drug use?</p> <p>2. Does your <b>partner</b> have any problem with alcohol or drug use?</p> <p>3. Do any of your close <b>friends</b> have any problem with alcohol or drug use?</p>	<p>___ Yes    ___ No</p> <p>___ Yes    ___ No</p> <p>___ Yes    ___ No</p>	<p><b>If YES to questions #1, 2, or 3:</b></p> <p><input type="checkbox"/> Stated concern that any of these can increase risk for developing alcohol and drug problems</p>
<p>4. In the month before you knew you were pregnant, how many days did you smoke cigarettes or use <b>tobacco</b>? (Even one cigarette per day equals one day.)</p> <p style="padding-left: 20px;"><b>If ANY DAYS, ask:</b> In the last month, how many days did you smoke cigarettes, or use any form of tobacco?</p> <p>5. In the month before you knew you were pregnant, how many servings of <b>alcohol</b> (beer, wine, wine coolers, or hard liquor) did you drink?</p> <p style="padding-left: 20px;"><b>If ANY SERVINGS, ask:</b> In the last month, how many days a week did you drink alcohol?</p> <p>6. Have you ever used <b>other drugs</b> such as: cocaine, methamphetamines, amphetamines, tranquilizers, heroin, prescription pain pills (other than as prescribed), marijuana, LSD, PCP, or inhalant drugs (fumes from aerosol cans, or other fumes) in the past?</p> <p style="padding-left: 20px;"><b>If YES, ask:</b> In the month before you knew you were pregnant, how many times did you use any of the drugs that you have used in the past?</p> <p style="padding-left: 20px;"><b>If ANY TIMES, ask:</b> In the last month, how many days a week did you use the drugs you mentioned?</p>	<p>___ Days (#)</p> <p>___ Days (#)</p> <p>___ Servings (#)</p> <p>___ Days (#)</p> <p>___ Yes    ___ No</p> <p>___ Times (#)</p> <p>___ Days (#)</p>	<p><b>If ANY cigarette, alcohol, or drug use in questions #4- #6:</b></p> <p><b>Completed Brief Intervention:</b></p> <p><input type="checkbox"/> Stated concern</p> <p><input type="checkbox"/> Advised abstinence</p> <p><input type="checkbox"/> Discussed patient's reaction</p> <p><input type="checkbox"/> Agreed on a plan of action</p> <p><b>Completed Referral:</b></p> <p><input type="checkbox"/> Kentucky's Tobacco Quit Line (1-800-QUIT-NOW)</p> <p><input type="checkbox"/> Behavioral health provider for assessment/ treatment</p> <p style="padding-left: 20px;">Provider: _____</p> <p><input type="checkbox"/> KIDS NOW Plus for case management and linkage with behavioral health services</p> <p><input type="checkbox"/> Other: _____</p>
<p>7. Are you feeling at all <b>unsafe</b> in any way in your relationship with your current partner or with a previous partner?</p>	<p>___ Yes    ___ No</p>	<p><b>If YES to question #7:</b></p> <p><input type="checkbox"/> Followed office procedure for partner abuse disclosure</p>
<p>8. Over the past few weeks, has <b>worry, anxiety, depression or sadness</b> made it difficult for you to do your work, get along with others, or take care of things at home?</p>	<p>___ Yes    ___ No</p>	<p><b>If YES to question #8:</b></p> <p><input type="checkbox"/> Stated concern about the effects of depression and anxiety on the baby</p> <p><input type="checkbox"/> Referred to behavioral health provider for assessment/ treatment</p> <p style="padding-left: 20px;">Provider: _____</p>

**\*Statewide Kids Now Plus contact: Katie Stratton 502-782-6192**

\* Adapted from screening instrument created by Robert Walker, University of Kentucky, Center on Drug and Alcohol Research.

## **Brief Intervention Guidelines**

A brief intervention combines *giving information* and *showing concern*. The purpose of a brief intervention is to raise awareness of a problem, recommend a specific change (for example abstinence or reduced substance use or accepting a referral), and then discuss it with the patient to determine exactly what she is willing and able to do.

- Research has shown that encouragement and educational input from a prenatal care provider significantly increases the chance that a woman will abstain or reduce her substance use during her pregnancy.
- The person delivering the brief intervention should be empathetic, warm and encouraging, allowing the patient to consider the possibility of change without getting defensive. If the clinician slows down to ask the questions and listens carefully to the answers, the patient will feel that the clinician cares about her, and be more likely to give honest answers.
- The patient should be offered several options of actions she might take, and encouraged to take responsibility for choosing an action and for working on behavioral change in a way that is manageable for her.
- Remember, change is a process that may take time. Continue to ask about her use in subsequent visits, encourage even small positive changes, and let her know that you believe she *can* change.

## **Brief Intervention Steps**

### **1. After completing the screening questionnaire, ask: “Is it alright if we talk for a minute about these questions?”**

In this step, the clinician seeks to build rapport with the client, define the purpose of the conversation, and gain permission from the patient to proceed.

### **2. State your medical concern:**

Being warm and nonjudgmental and using information gathered in the screening, give brief feedback about how the patient's behavior might affect the outcome of the pregnancy. No matter what substance needs to be addressed, it is important to use an “I am concerned” message and be nonjudgmental. Be direct, but avoid pushing too hard.

**“You mentioned that you have used \_\_\_\_\_ (marijuana/ heroin/ pain pills/ methamphetamines/ etc.) \_\_\_\_\_ in the past. I am concerned because we know that when \_\_\_\_\_ (specific substance) \_\_\_\_\_ is used during pregnancy, it can cause the baby to go through withdrawal when it is born.”**

OR **“You said that you used some alcohol during the last month. I am concerned because research shows that alcohol exposure during pregnancy can cause a child to have serious learning problems, or even mental retardation.”**

### **3. Advise abstinence:**

Suggest abstinence, and then ask for the patient's reaction, negotiating what she is willing/ready to do. It is important to listen and refrain from arguing or trying to convince her. Simply return to statements of your concern. Offer change options that match her readiness for change. Be realistic: recommend abstinence, but if she is not ready, accept harm reduction.

**“The best thing you can do for your child is to stop using \_\_\_\_\_ (specific substance) \_\_\_\_\_ (pause and see if the patient will respond to your statement). How difficult do you think that might be for you?” (Listen and reflect.)**

### **4. Discuss her reaction:**

Using open-ended questions, explore her readiness to change. Accept where she is, but accentuate any indication that she sees she has a problem or that she thinks she can make a change.

### **5. Agree on a plan of action:**

Find an action that she is willing to take, and agree on it. Accept that she may only be ready to take a small step. A menu of options might include: talking with someone (i.e., accepting a referral to the KIDS NOW Plus case manager or a KIDS NOW Plus prevention class if available in your area, meeting with a behavioral health provider, or calling Kentucky's Tobacco Quit Line); reducing her level of use; enlisting the help of a supportive friend or family member; and/or thinking about it and checking in with you at her next appointment.

### **6. If she does agree to be referred to a behavioral health specialist for an assessment:**

Follow the best practice protocol for a “warm hand off” by scheduling the appointment before she leaves your office, and by trying to schedule it on the same or next day.

**More best practices for referrals:** 1) Establish protocols for referrals and care coordination with local substance use treatment providers to ensure seamless care; 2) When contacting a community mental health center, be sure to state that the patient is pregnant, because these providers are required by federal regulation to meet with pregnant women within 48 hours of your phone call; and 3) Follow up with the patient soon re: whether she met with the behavioral health specialist.

**This screening instrument is in the public domain. For further information, call KIDS NOW Plus 502-782-6192**

#### **Sources:**

Brief Interventions and Brief Therapies for Substance Abuse, Treatment Improvement Protocol (TIP) Series 34, 1999. Substance Abuse and Mental Health Services Administration.

Chasnoff, I.J. & McGourty, R.F., 2003. *I Am Concerned...* Pre-Treatment: A Brief Intervention for the Primary Prenatal Care Setting. National Training Institute.